

# DECLARATION AND POWER OF ATTORNEY FOR ORIGINAL U.S. PATENT APPLICATION

Attorney's Docket No. ORTHO-001US

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **TRANSDERMAL CHONDROITIN AND GLUCOSAMINE DELIVERY SYSTEM AND METHOD OF USE**, the specification of which,

(check one)

1. ☒ is attached hereto.
2. ☐ was filed on \_\_\_\_\_ as  
U.S. Application No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.
3. ☐ was filed on \_\_\_\_\_ as  
International PCT Application No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, CFR § 1.56.

I hereby claim foreign priority benefits under Title 35, United States code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed:

## Prior Foreign Application(s)

Priority Benefits Claimed?

\_\_\_\_\_  
(Appl. No.)                      (Country)                      (Filing Date)

☐ Yes    ☐ No

\_\_\_\_\_  
(Appl. No.)                      (Country)                      (Filing Date)

☐ Yes    ☐ No

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

## Prior Provisional Application(s)

\_\_\_\_\_  
(Application No.)                      (Filing Date)

\_\_\_\_\_  
(Application No.)                      (Filing Date)

